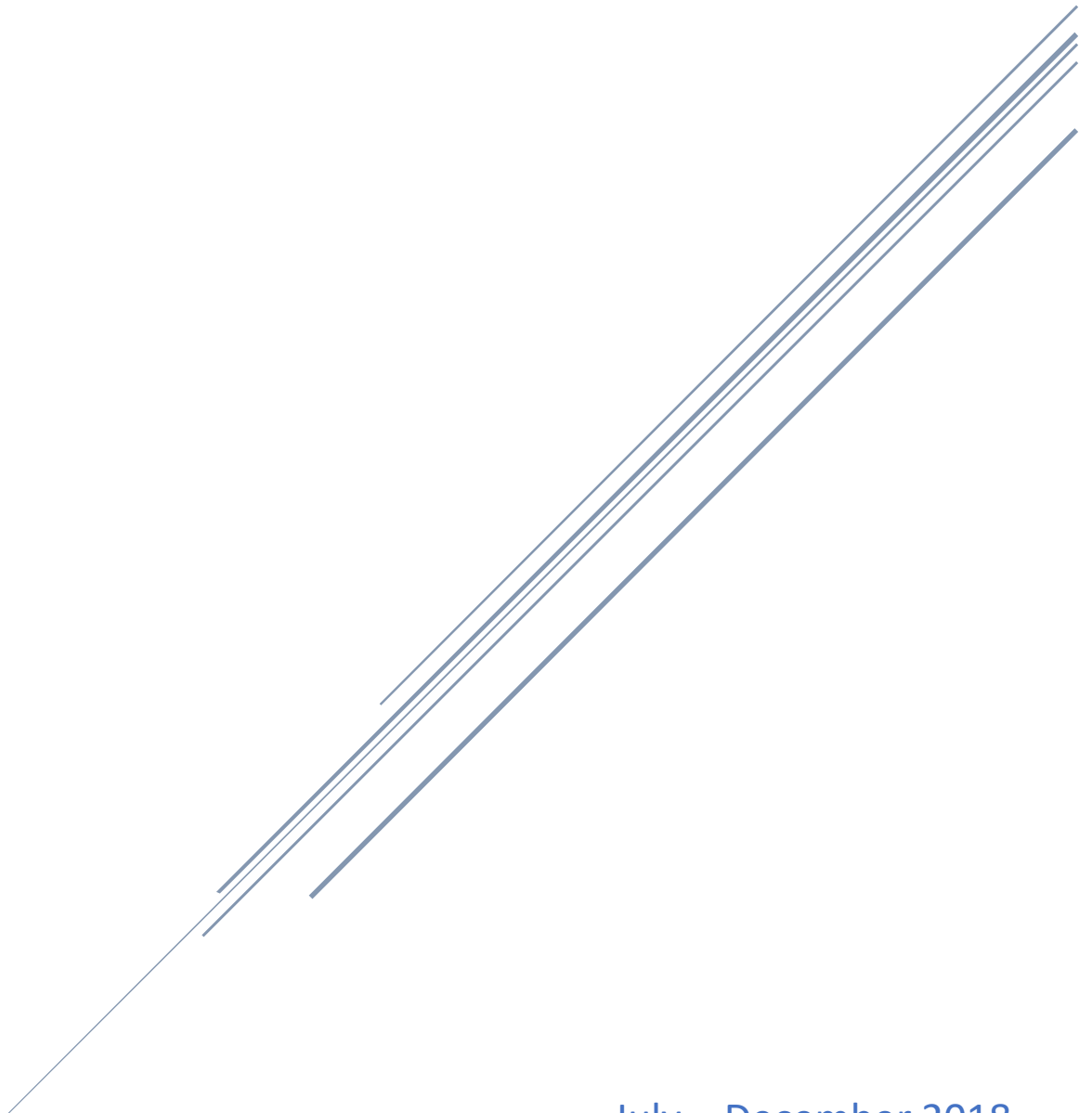


# THE INTERNATIONAL JOURNAL OF FRONTIER SCIENCES

Volume 2 (Issue 2)



July – December 2018  
[www.tijfs.com](http://www.tijfs.com)

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## Primary Healthcare

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One of the most effective and valuable principles to promote health in all countries has been adoption of Primary Health Care (PHC) as a fundamental strategy. In September 1978, an international conference was held in Alma-Ata, whose great achievement was declaring PHC as a roadmap for “Health for All” by the year 2000 (HFA 2000). Indeed, as a new approach beyond the traditional system of health care, PHC insisted on justice in the delivery and distribution of services in the health sector (1).

Hence, PHC needs a reasonable development in the health sector as well as in economic and social sections in order to facilitate individuals’, families’ and communities’ access to basic but necessary health services. The first purpose of PHC was achieving a level of physical, psychological and social well-being that people can make fair interaction with their surrounding world. In fact, PHC is the cornerstone of health systems worldwide (2).

The PHC seeks increasing equity in the health sector, reducing public spending, increasing universal coverage of health services, reducing deficiencies in health status and, above all, involving people in the field of health promotion and delivery of care. World Health Organization (WHO) in its 2008 Health Report entitled "Primary health care, now more than ever" reaffirmed the importance of PHC. However, a large share of the financial resources is paid for the secondary healthcare, while the PHC can reduce up to 70% of the global burden of disease with much less cost. The report necessitates health systems to take four steps towards fulfilling the PHC goals, including (3);

- (i) Universal coverage of people based on their needs, with no attention to ability to pay.
- (ii) Making health systems more people-cantered, so that healthcare is more responsive to the social and local changes.
- (iii) Integrating public health with primary health through public policy making.
- (iv) Making the governments more reliable through negotiation-based leadership.

Pakistan has a relatively large primary health care infrastructure. This includes 5000 basic health units, 600 rural health centres, 7500 other first-level care facilities and over 100 000 lady health workers providing services across Pakistan. At present, different health programmes target different health conditions in Pakistan. Each programme has an independent organizational structure at the federal, provincial, district and first-level care facility levels. Having integrated primary health care services will help to improve the health status of the people of Pakistan (4). Pakistan needs to improve Primary Healthcare sector to provide health facilities at door step and to improve the health status of population.

*(This journal is published by TIJFS Chakwal Pakistan)*

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